

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/518165
	Filing Date	March 1, 2000
	First Named Inventor	Koulekian et al.
	Art Unit	1645
	Examiner Name	Ja-Na Hines
	Attorney Docket Number	ISA-100.01

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**METHOD FOR DETECTING THE PRESENCE OF TARGET BACTERIA OR A TARGET COMPONENT CARBOHYDRATE ANTIGEN THEREOF**

**SIGNATURE of Applicant or Assignee of Record**

Signature

Name

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Date

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.

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